

Laparoscopy

Information for Patients

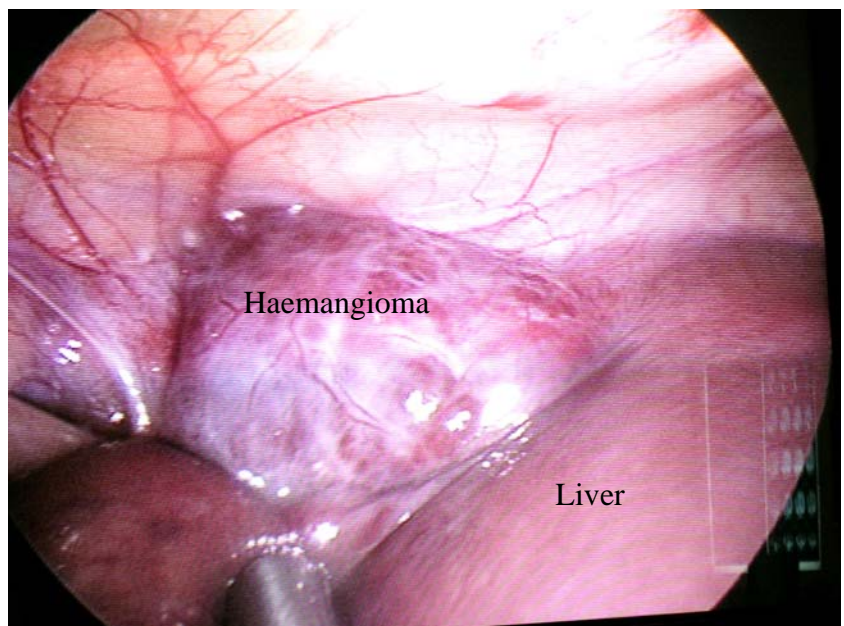
Laparoscopy Technique

Laparoscopy is the surgical technique that is often called 'keyhole surgery.' It involves inserting a small camera inside the abdomen on the end of a long stick. The image is then projected onto monitors in the operating room so that the surgeon can see the internal organs. A full General Anaesthetic is required.

The instruments used in laparoscopy can be slid in and out of the abdomen through ports, which are valved tubes entering the abdomen through small cuts. The initial tube is usually inserted under vision in the space just below the umbilicus (belly-button) because this is usually the safest entry point. Once the first tube is in place, carbon dioxide gas is used to distend the abdominal cavity to create a space so that the surgeon can look around.

Depending on the surgery, the surgeon will insert other ports into the abdomen to manipulate the organs he is operating on.

This image shows the sort of picture the surgeon gets at laparoscopy. By gentle pressure with instruments on the tissues the surgeon can even get some sense of whether a lump is hard or soft. Biopsies can be taken, and of course, many operations are now performed with laparoscopy.



The Post Operative Course

The post operative course depends largely on what was done. For simple surgery, such as a diagnostic laparoscopy or some laparoscopic hernias, patients will often go home the same day. Patients having more complex surgery can expect to stay overnight at least. Usually, patients return to their normal diet within a day or so.

It is painful, but less so than open surgery. Pain pills are required for the first few days. Expect around a week off work depending on your job.

Dressings stay on for 1 week and stitches are dissolvable.

A follow-up appointment with Dr Crawford at 3 weeks is usual.

Heavy lifting is to be avoided for around 6 weeks.

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